



Town of Fishkill Clerk's Office

Town Hall / Hennebery Senior Center Use Application and Permit

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Name of Applicant: _____

Sponsoring Agency: _____

Address: _____

Day/Work Phone #: _____ Home #: _____

Proposed Activity: _____

Date & Time: _____

Estimated # of People Attending: _____

(**Maximum in Hennebery Senior Center Room: 175**)

(**Maximum in Town Meeting Room 163-half room / 275-full room**)

Type of use of the facilities may require an "Insurance Certificate" in the amount of \$1,000,000.00 listing the Town of Fishkill as additionally insured.

Required: Yes _____ No _____

All groups requesting use of the facilities shall request use at least 2 weeks prior to date requested from the Town Clerk. The room may be reserved for use once per month.

Participants: The requester shall be a Town of Fishkill resident.

- Use of facilities by not for profit groups \$100.00
 - Fee for security guard \$36.00 minimum
or \$12.00/hr
 - Fee for rearrangements set-up & return by cadets \$25.00
- ***Town affiliated groups shall be exempt from the fee***

All groups shall maintain the cleanliness of the room. No Food is permitted in the Meeting Room. For the Senior Citizen Room must have approval by Town Board (see attached). All garbage must be picked up, bagged, and deposited in the dumpster by the police station. Future privileges for use of facilities will be lost if facility is not left in good condition. The Town reserves the right to assess the applicant for any damages to the facility. No furniture and/or supplies shall be taken from the room. Storage facilities shall not be provided by the Town for any group other than Town sanctioned groups. Upon leaving the Hennebery Senior Center, tables and chairs shall be returned to the floor plan for use by the Senior Drop-In center.

Use of facilities shall be limited to between the hours of 9:30am and 10pm. Should a problem arise during the use of the room, contact the security guard or Fishkill Police Department at 831-1110. If a medical emergency occurs, call Alamo at 831-3330.



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No alcohol and No smoking permitted in the Town Hall.

(*** For Town Board Use Only ***)

Approved by: _____ (for Town Board use ***)

Fee paid: Yes _____ No _____ Amount _____

(*** For Custodian Use Only ***)

Was Town Hall left in an acceptable condition?: Yes _____ No _____

If no, list unacceptable areas (use reverse side if necessary):

REQUEST FOR REFRESHMENTS

Any group requesting permission to use the Senior Citizens Kitchen Facilities must abide by the following rules:

- Provide their own appliances, paper products, cups and food supplies.
- No articles shall be removed from the Senior Citizen supply cabinets.
- Use of the Senior Citizen coffee maker is not allowed.
- Kitchen facilities must be cleaned up and restored to original state.

The undersigned agrees to abide by the above rules and understands that they will be responsible to pay for any damages of the Senior Citizens facilities.

Signature

Approved by: _____